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PTC/SB/97 (08-00)
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Application Number: 09/304,035

Filing Date: 5/3/1999

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- 1. Fee Transmittal
- 2. Response to Office Action Dated 06/15/2005

Total pages including cover sheet: 22

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PTO/SB/17 (12-04)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						
FEE TRANSMITTAL			7 Opinosaeri i i emissi.	09/304,035 5/3/1999		
			Filing Date	Glorgio J. Vanzini		
For FY 2005			First Named Inventor	AHSHIK KIM		
Applicant claims small entity status. See 37 CFR 1.27			Examiner Name			
			Art Unit	2876		
TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. MS1 0254US						
METHOD OF PAYMENT (check all that apply)						
Check Credit Card Money Order None Other (please identify):						
Creek Credit Card Count Number 12-0769 Deposit Account Name: Lee & Hayes, PLLC						
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
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FEE CALCULATION						
1. BASIC FILING, SE	ARCH, AND I FILING I	EXAMINATION FEES	ARCH FEES EXA	AMINATION FEES		
	FILING	imall Entity	Small Entity	Small Entity	Fees Paid (\$)	
Application Type	<u>Fee (\$)</u>	Fee (\$) Fee		39 (5) Fee (\$)	Leas Lain (a)	
Utility	300	150 500		00 100	·	
Design	200	100 100	. 50	30 65		
Plant	200	100 300		60 80		
Reissue	300	150 500	0 250 6	300		
Provisional	200	100	0	0 0		
2. EXCESS CLAIM FEES Fee (\$) Fee (\$)						
Fee Description	for Reissucs	each claim over 20 a	nd more than in the or	iginal patent	50 25	
Each claim over 20 or, for Reissucs, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 25 100 100						
Multiple dependent claims 300 180						
Total Claims	Extra Claim			itiple Dependent Claims Fee (\$) Fee Pal		
- 20 or HP = HP = highest number of to		, ·· <u> </u>		99.44	<u>- 141</u>	
<u>indep. Ciaims</u>	Extra Claim	<u>s Fee (\$) Fe</u>	e Paid (\$)			
- 3 or HP = HP = highest number of inc	tependent claims	paid for, if greater than 3				
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Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (5) Fee Paid (5) - 100 = /50 = (round up to a whole number) x =						
4. OTHER FEE(S) Fees Paid (\$)						
Non-English Specification, \$130 fee (no small entity discount)						
Other:						
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Signature (Attorney/Agent) 43300 (303					-8-01 -8-01	
Name (Print/Type) Mark	C. Farrell			Date 9	~ & ~ ~ ~	

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No	09/304,035				
Filing Date	May 3, 1999				
Inventors	Vanzini et al.				
Assignee	Microsoft Corporation				
Assignee	2876				
Group Art Unit	9156				
Confirmation No	Δ Kim				
Examiner	MS1_0254LIS				
Attorney's Docket No. MS1-0254US					
Title: PCMCIA-Compliant Smart Card Secured Memory Assembly for Folding					
User Profiles and Documents					

RESPONSE TO OFFICE ACTION OF JUNE 15, 2005

To:

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

From:

Mark Farrell (Tel. 509-324-9256; Fax 509-323-8979)

Lee & Hayes, PLLC

421 W. Riverside Ave., Suite 500

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INTRODUCTORY COMMENTS

This communication is in response to the Office Action dated June 15, 2005, with a three month shortened statutory period for reply.

Amendments to the claims begins on page 3 of this paper.

A listing of claims begins on page 4 of this paper.

Remarks begin on page 12 of this paper.